

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 889745 RECEIPT DATE: 07 / 20 / 01  
IA NUMBER: PCT/ AU00 / 00030 IA FILING DATE: 01 / 20 / 00  
FAMILY NAME: PEACH DELAY WAIVED (Y/N): Y  
GIVEN NAME: DEMAND RECEIVED (Y/N): Y  
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 01 / 20 / 99  
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N  
ATTORNEY DOCKET NUMBER: GH-01383 COUNTRY:  
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000  
FAX  
NAME: JAMES RAY & ASSOCIATES  
STREET: 2640 PITCAIRN ROAD  
CITY: MONROEVILLE  
STATE/COUNTRY: PA ZIP: 15146  
EMAIL:  
APPLICATION TITLES:  
ROCK BORING DEVICE

TAB TO LAST POSITION,PUSH SEND